## ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

## DECLARATION AND POWER OF ATTORNEY U.S.A.

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As a below named inventor, I declare that my residence, post office address and citizenship are stated below next to my name, the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed at 201 below), or a first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) or the subject matter which is claimed and for which patent is sought on the invention entitled: PROCESSES FOR PRODUCTION OF IMMUNOGLOBULIN A IN MILK X PCT International Application No. which is described and claimed in: PCT/NZ98/00070 filed 29 May 1998 the attached specification X the specification in application November 29, 1999 (if applicable) and I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. l acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filling date before that of the application on which priority is claimed: Prior Foreign Application(s) Priority Claimed 314959 **New Zealand** 29 May 1997 X (Number) (Country) (Day/Month/Year Filed) No (Number) (Country (Day/Month/Year Filed) (Number) (Country) (Day/Month/Year Filed) I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below: Application No. Filing Date Application No. Filing Date Thereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application: (Application Serial No.) (Filing Date) (Status: patented, pending, abandoned) REWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys (Registration No. ) to prosecute this application, receive and act on instructions from my agent, and transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACÓBSON JR. (20,851); D. DOUGLAS PRICE (24,514); JOHN CLARKÉ HQLMAN (22,769); MARVIN R. STERN (20,640); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409) SEND CORRESPONDENCE TO: DIRECT TELEPHONE CALLS TO: (piease use Attorney's Docket No.) (202) 638-6666 FQ. JACOBSON, PRICE, HOLMAN & STERN PROFESSIONAL LIMITED LIABILITY COMPANY JACOBSON, PRICE, HOLMAN & STERN 400 SEVENTH STREET N.W. PROFESSIONAL LIMITED LIABILITY COMPANY WASHINGTON, DC, 20004 \*Inventor(s) name must include at least one unabbreviated first or middle name. FULL NAME FAMILY NAME GIVEN NAME MIDDLE NAME OF INVENTOR HODGKINSON Alison Jov **RESIDENCE &** 201 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP Hamilton **NEW ZEALAND NEW ZEALAND** POST OFFICE POST OFFICE ADDRESS STATE OR COUNTRY ZIP CODE **ADDRESS** 1076 River Road Hamilton **NEW ZEALAND FULL NAME FAMILY NAME** GIVEN NAME OF INVENTOR \* HODGKINSON Steven Charles RESIDENCE & 202 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP Hamilton **NEW ZEALAND NEW ZEALAND** POST OFFICE POST OFFICE ADDRESS CITY STATE OR COUNTRY ZIP CODE **ADDRESS** 1076 River Road Hamilton **NEW ZEALAND** FULL NAME FAMILY NAME GIVEN NAME MIDDLE NAME OF INVENTOR \* RESIDENCE & STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP POST OFFICE POST OFFICE ADDRESS STATE OR COUNTRY ZIP CODE ADDRESS I further declare that all statements made herein of my own knowledge are true and that all statement made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon SIGNATURE OF INVENTOR 202 SIGNATURE OF INVENTOR 201 \* SIGNATURE OF INVENTOR 203

DATE

17.01/90

Additional inventors are named on separately numbered sheets attached hereto.

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